

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB Number: Expires: April 30, 2008

Estimated average burden hours per response . . . . 16.00

SEC USE ONLY								
Prefix	Scrial							
DATE RECEIVED								
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UNIFORM LIMITED O	FFERING EXEM	PTION		
Name of Offering ( check if this is an amendment and name has change	d, and indicate change.)			
Premiere Publishing Group, Inc.	Duly 506	TULOE		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Type of Filing: New Filing Amendment	Rule 506 Section 4(6)			
A. BASIC IDENT	FICATION DATA			
1. Enter the information requested about the issuer			0	5072096
Name of Issuer ( check if this is an amendment and name has changed, a	nd indicate change.)			· · · · · · · ·
Premiere Publishing Group, Inc.				
Address of Executive Offices (Number and Str	eet, City, State, Zip Code)	Telephone Num	ber (Including	Area Code)
386 Park Avenue South, 18th Floor, New York, New York 10016		212-481-1005		
Address of Principal Business Operations (Number and St (if different from Executive Offices)	reet, City, State, Zip Code)	Telephone Num	ber (Including	Area Code)
Brief Description of Business	<u></u>		^ /	<del>(************</del>
A newly organized corporation that publishes the national quarterly magazine "I	rump World."		W	AUG 23 20
Type of Business Organization	· ·	olease specify):	7	THOMSON
business trust limited partnership, to be form				0 00 00 m 6 4 1 2 1
Actual or Estimated Date of Incorporation or Organization:    Month   Verification   0   3   0	Actual Esti			
GENERAL INSTRUCTIONS				
Federal: Who Must File: All issuers making an offering of securities in reliance on an exe 77d(6).	mption under Regulation D o	τ Sætion 4(6), 17 CF	FR 230.501 et s	eq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale and Exchange Commission (SEC) on the earlier of the date it is received by the which it is due, on the date it was mailed by United States registered or certification.	: SEC at the address given be			
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street,	N.W., Washington, D.C. 205	549.		
Copies Required: Pive (5) copies of this notice must be filed with the SEC, or photocopies of the manually signed copy or bear typed or printed signatures.			s not manually	signed must be
Information Required: A new filing must contain all information requested. A thereto, the information requested in Part C, and any material changes from the not be filed with the SEC.				
Filing Fee: There is no federal filing fee.				
State:				
This notice shall be used to indicate reliance on the Uniform Limited Offerin ULOE and that have adopted this form. Issuers relying on ULOE must file are to be, or have been made. If a state requires the payment of a fee as a p accompany this form. This notice shall be filed in the appropriate states in this notice and must be completed.	a separate notice with the S recondition to the claim for	ecurities Administr the exemption, a f	ator in each s ee in the prop	tate where sales er amount shall
ATTE	NTION —			7
Failure to file notice in the appropriate states will not result i appropriate federal notice will not result in a loss of an availa filing of a federal notice.		•	•	

SEC 1972 (5-05)

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter General and/or Managing Partner Jacobson, Michael Full Name (Last name first, if individual) 386 Park AvenueSouth, 18th Floor, New York, New York 10016 Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: Promoter General and/or Van Damm, Al Full Name (Last name first, if individual) 386 Park AvenueSouth, 18th Floor, New York, New York 10016 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Check Box(es) that Apply: ☐ Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	<del>-</del> -		<del></del> :		B. INF	ORMATI	ON ABOU	T OFFER	ING		· ·		
												Yes	No
1.	mas the	issuer soi	d, or does t			-				•	•••••		Ø
,	Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?										\$ 25,00	0.00	
•	. What is die minimum myestment met win de accepted from any individual?									************	3 <u>22,00</u> Yes	No.	
3.	Does the offering permit joint ownership of a single unit?									••••••	×	Ö	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the off												
			ted is an ass			•					_		
			une of the b you may s							ciated pers	ons of such		
Eul			first, if indi		monnace	on for cust	Diokei or c				<del></del>		·
	ii i vanic (	Last Hamic	11131, 11 1110	*10021)				•					
Bu	siness or	Residence	Address (N	umber and	Street, Cit	ty, State, Z	ip Code)						
_			r, New York		10004			<del></del>					<del></del>
			oker or De	alcr									
_		nant Group, I	Listed Ha	Solicited	or Intends	to Solicit l	Purchasers				<del></del>		
			" or check								*******	. [] Ali	States
	·	(AV)	[47]	[A9]	(27)	(حق	िक	(SE)	المحا	الججا	رمما	ري ا	<u> </u>
	₩.	IN	IA	KS KS		LA LA	ME	DE	DC MA	MI	[GA] [MN]	MS	MO
	MT	NE	NV	NH		MM	NX	NC	מא	(M)	OK	OR	₹.
	RJ	SC	SD	TN	TX	บา	VT	VA	WA	WV	WI	WY	PR
Ful	ll Name (	Last name	first, if ind	ividual)				<del></del>	<del>.</del>		<del></del>		
	<del></del>												
Bu	siness or	Residence	Address (N	lumber and	Street, Ci	ity, State, 2	Zip Code)						
Na	mc of As	sociated Br	oker or De	alcr	<del> </del>			<del></del>	<del></del>		<del></del>	<del> </del>	··· <del>·</del>
Ste	tee in Wi	nich Person	Listed Ha	Solicited.	or Intende	to Solicit i	Porchagers			<del></del>			
314			s" or check									□ A1	l States
					<u></u>								
	IL	IN	IAZ I	KS	CA KY	[LA]	ME	MD	MA	MI	[GA] [MN]	MS	MO
	MT	NE	NV.	NH	נא	NM.	NY	NC	<b>25</b>	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Ful	Il Name (	Last name	first, if ind	ividual)									
_													
Bu	siness or	Residence	Address (N	iumber and	l Street, Ci	ity, State,	Zip Code)						
Na	me of As	sociated B	roker or De	aler			<del></del>	-				<del></del>	
Ste	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		•				
	(Check	"All State	s" or check	individual	States)				•••••••••	·····	·····	AI	1 States
	AL	AK	AZ	AR	CA	СО	СТ	DE	DC	FL	GA	HI	ΔI
	I	IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	sc	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EX	PENSES AND USE OF PROCEEDS	<u> </u>	
<ol> <li>Enter the aggregate offering price of securities included in this offering and sold. Enter "0" if the answer is "none" or "zero." If the transaction is an e this box and indicate in the columns below the amounts of the securities already exchanged.</li> </ol>	xchange offering, check		
Type of Security	Aggre Offering	-	Amount Already Sold
Debt	\$		
Equity	\$ 2,500	000.00 \$	625,000.00
🔀 Соттол 📋	Preferred		
Convertible Securities (including warrants)	\$	s_	
Partnership Interests	\$	s	
Other (Specify)			
Total			625,000.00
Answer also in Appendix, Column 3, if filing under ULO	 E.		
2. Enter the number of accredited and non-accredited investors who have pur offering and the aggregate dollar amounts of their purchases. For offerings the number of persons who have purchased securities and the aggregate purchases on the total lines. Enter "0" if answer is "none" or "zero."	under Rule 504, indicate		
	Num Inves		Aggregate Dollar Amount of Purchases
Accredited Investors		18 5	625,000.00
Non-accredited Investors			
Total (for filings under Rule 504 only)	pagagaran and an	;	3
Answer also in Appendix, Column 4, if filing under ULC			
<ol> <li>If this filing is for an offering under Rule 504 or 505, enter the information n sold by the issuer, to date, in offerings of the types indicated, in the twelve first sale of securities in this offering. Classify securities by type listed in Pa</li> </ol>	(12) months prior to the		
	Турс		Dollar Amoun
Type of Offering	Secu	•	Sold
Rule 505			
Regulation A			3
Rule 504			<u> </u>
Total	· ·		·
4. a. Furnish a statement of all expenses in connection with the issuance securities in this offering. Exclude amounts relating solely to organization The information may be given as subject to future contingencies. If the am- not known, furnish an estimate and check the box to the left of the estimate.	expenses of the insurer. ount of an expenditure is		
Transfer Agent's Fees	***************************************	□ s	
Printing and Engraving Costs		s	
Legal Fees		s	30,000.00
Accounting Pees		⊠ s	
Engineering Fees			
Sales Commissions (specify finders' fees separately)		⊠ \$	325,000.00
Other Expenses (identify)			
Total		<b>⊠</b> :	360,000.00

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· .	C. OFFERING PRICE,	Number of investors, expenses a	ND USE OF PRO	CEEDS		
	b. Enter the difference between the aggregate and total expenses furnished in response to Par proceeds to the issuer."	rt C-Question 4.a. This difference is the "au	diusted gross		<b>5</b> _2,	,140,000.00
<b>5.</b>	Indicate below the amount of the adjusted gro each of the purposes shown. If the amount if check the box to the left of the estimate. The to proceeds to the issuer set forth in response	for any purpose is not known, furnish an e	stimate and			
			1	Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees		🔀 S_	300,000.00	<b>□</b> \$_	
	Purchase of real estate		🗀 s		<b>□</b> \$	
	Purchase, rental or leasing and installation of and equipment	of machinery				
	Construction or leasing of plant buildings as	nd facilities				
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	ne assets or securities of another				
	Repayment of indebtedness					
	Working capital				⊠s_	915,000.0
	Other (specify): Costs associated with printing a	and distributing the magazines			<b>⊠</b> 3_	925,000.0
					□s_	
	Column Totals		🔀 s_	300,000.00	⊠s	1,840,000.0
	Total Payments Listed (column totals added			⊠ \$2		_
		D. FEDERAL SIGNATURE				
ign	issuer has duly caused this notice to be signed ature constitutes an undertaking by the issuer nformation furnished by the issuer to any no	to furnish to the U.S. Securities and Excha	nge Commission.	upon writter	e 505, reque	the following the state of its sta
	er (Print or Type)	Winher land	Date Date			
	e of Signer (Print or Type)	Title of Signer (Print of Type)	V V Xugu	st 18, 2005		
		Title of Signer (Frint or Type)				
1:-1	ael Jacobson	President				

-ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

[ <u> </u>		E. STATE SIGNATURE
1.		.262 presently subject to any of the disqualification Yes No
		See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby underta D (17 CFR 239.500) at such times as	kes to furnish to any state administrator of any state in which this notice is filed a notice on Form required by state law.
3.	The undersigned issuer hereby under issuer to offerees.	takes to furnish to the state administrators, upon written request, information furnished by the
4.	limited Offering Exemption (ULOE)	It the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform of the state in which this notice is filed and understands that the issuer claiming the availability stablishing that these conditions have been satisfied.
	er has read this notification and knows thorized person.	he contents to be true and has duly caused this notice to be signed on its behalf by the undersigned
•	Print or Type)	Signature Date Date August 18, 2005
	Publishing Group, Inc. Print or Type)	Title (Print or Type)  August 18, 2005

## Instruction:

Michael Jacobson

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	,			APPI	ENDIX						
1	Intend to non-a	2 I to sell accredited in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL											
AK	_										
AZ											
AR											
CA		×	Common Stock	1	\$25,000.00	0	\$0.00		×		
со		×	Common Stock	1	\$25,000.00	0	\$0.00		×		
CT											
DE											
DC											
FL		X	Common Stock	1	\$25,000.00	0	\$0.00		×		
GA					· · · · · · · · · · · · · · · · · · ·		!				
ні	 										
ID											
IL	<u> </u>	×	Common Stock	3	\$100,000.00	0	\$0.00		×		
IN											
IA											
KS											
KY		×	Common Stock	1	\$25,000.00	0	\$0.00		×		
LA											
ME											
MD											
МА											
MI											
MN											
MS											

APPENDIX										
1	Intend to non-a investor	2 3 to sell coredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Number of Number of Accredited Non-Accredited					
мо										
МТ										
NE										
NV								_		
NH	·									
lи		×	Common Stock	2	\$50,000.00	0	\$0.00		×	
NM										
NY		×	Common Stock	6	\$225,000.00	0	\$0.00		×	
NC										
ND		ļ 	<u></u>							
ОН		×	Common Stock	1	\$25,000.00	0	\$0.00		X	
ок										
OR			<u> </u>	ļ					ļ	
PA		×	Common Stock	2	\$125,000.00	0	\$0.00		×	
RI							<u> </u>			
sc										
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TX				!						
UT	<u> </u>	<u> </u>								
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WA				· · · · · · · · · · · · · · · · · · ·					<u> </u>	
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				APPI	ENDIX		· · ·	· .	
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR					]		<del>-</del> .		